								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003								Incc-109,					] .
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL I	ENTITY	OF	OTHER	THAN ENTITY	
TO	TAL CLAIMS		45					RATE	FEE	٦	RATE	FEE	1
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	1
TOTAL CHARGEABLE CLAIMS			45 - mi	nus 20=	. 80		f	XS 9=		1	¥212	22	
INDEPENDENT CLAIMS			2 _minus 3 =		• ,		┢		<del>-                                    </del>	OR		270.0	p
MULTIPLE DEPENDENT CLAIM P			1.5					X43=	<del></del>	OR	X86=		l
				·				+145=		OR	+290=		l ·
* 11	the difference	in column 1 is	less than zero, enter "0" in			column 2	_	TOTAL		OR	TOTAL	1040	or
	Ċ				_	OTHER							
		(Column 1)	1	(Colum		(Column 3)	SMAI		ENTITY	OR	SMALL		ļ
AMENDMENT A	1028-05	REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.41	Minus.	4	5	=2	Γ	XS 9=		OR	X\$18≡	10	
	Independent	. 3	Minus		3	=	-	X43=	1	OR	X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT						$\vdash$			UH			ļ
	•					,	L	+145=		OR	+290=		
							AC	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1)		(Colun		(Column 3)	_						
ENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MO	Total	*	Minus	· <del>111</del>		= .	Г	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	•	Minus	***		=	┢	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						$\vdash$		<u> </u>	OR			İ
							Ŀ	+145=		OR	+290=		ĺ
						•	AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		l
		(Column 1).		(Colum		(Column 3)		•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus 🕡	**.		=		X\$ 9=		OR	X\$18=		
ME	independ nt	*	Minus	***		=	$\vdash$	X43=			X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		H	A43=		OR	∧00=		
			•	_		_	1 +	145=		OR	+290=		
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ODIT. FEE		
!! T	the "Highest Nur he "Highest Num	nber Previously Pa ber Previously Paid	id For" IN THIS I For" (Total or	S SPACE is Independer	less that nt) is the	n 3, enter "3." highest number			propriate box				
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